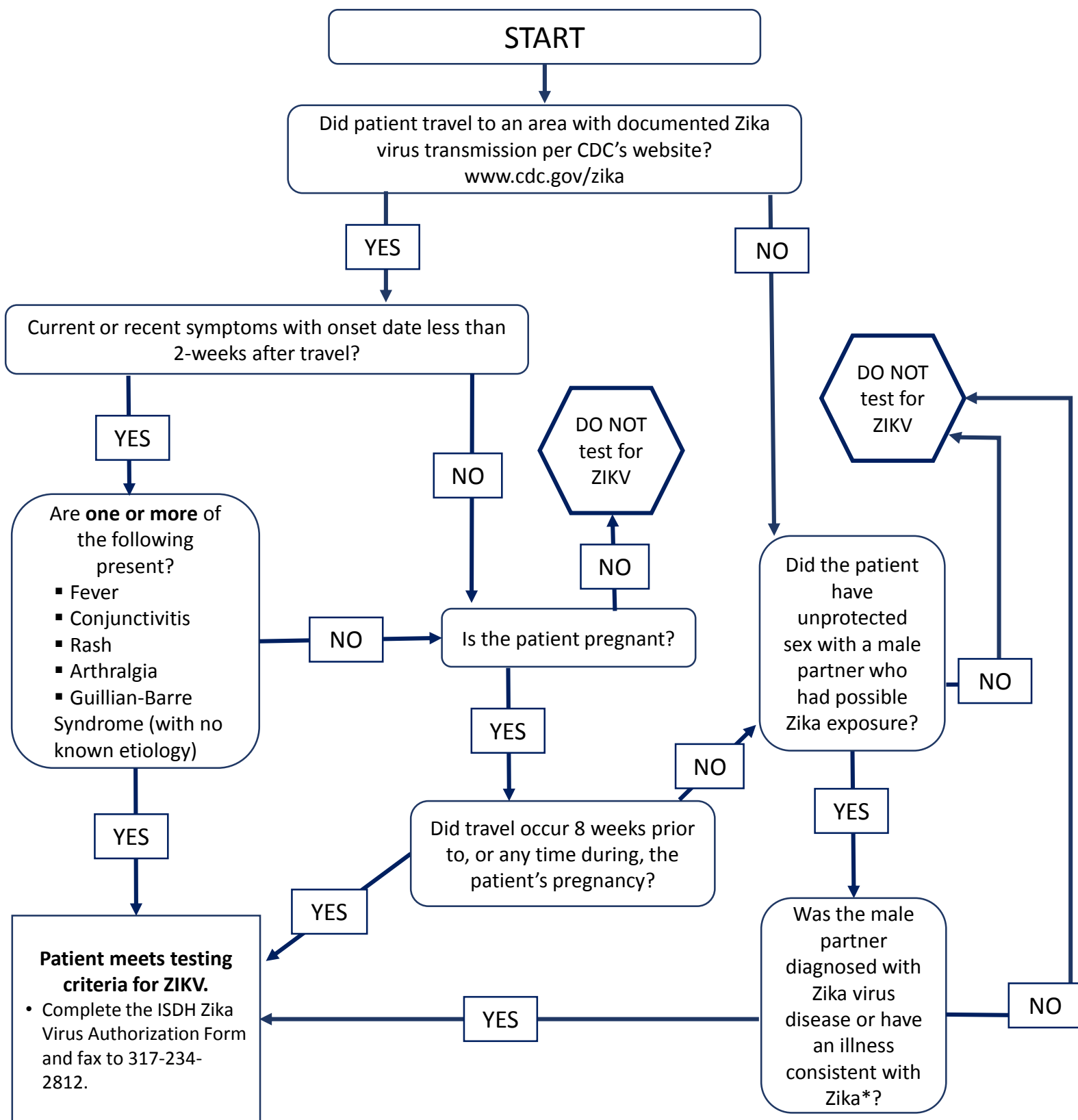


Indiana Flowchart: Authorization of Specimens for Zika Virus (ZIKV) Testing



For patients that meet testing criteria, please complete the ISDH Zika Virus Authorization Form and fax to 317-234-2812, attention Taryn Stevens.